PTO/SB/65 (03-01

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

persons are required to		election of information unless it displays a valid OMB control		=
Attorney Docket No.		CM2393	T ₄ O	
First Inventor		Antonella Porta, et al.	8778	
Assignee	The	The Procter & Gamble Company		
Title	Lau	ndry Additive Sachet	000	
Express Mail Label No.		EK419515454US	- 	_

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

ADDRESS TO:

Commissioner for Patents **Box Patent Application** Washington, D.C. 20231

- 1. [X] Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)
- 2. [] Applicant claims small entity status (see 37 CFR §1.27)
- 3. [X] Specification Total Pages [58] (preferred arrangement set forth below)
 - Descriptive Title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R&D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- 4. [] Drawing(s) (35 USC §113) Total Sheets []
- 5. Oath or Declaration
- Total pages [2]
- a. [X] Newly executed (original or copy) b. [] Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 18 complete
 - DELETION OF INVENTORS Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§1.63(d)(2) and 1,33(b).
- Application Data Sheet. See 37 CFR §1.76

- 7. [] CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
- 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. [] Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. | CD-ROM or CD-R (2 copies); or
 - ii. [] Paper
 - c. [] Statement verifying identity of above copies

ACCOMPA	NYING	APPLICA	MOITA	PARTS

- Assignment Papers (cover sheet & document(s))
- 10. [] 37 CFR 3.73(b) Statement (when there is an assignee)
- Power of Attorney

Citations

- 11. [] English Translation Document (if applicable)
- 12. [] Information Disclosure □ Copies of IDS
 - Statement (IDS)/PTO-1449
- 13. [] Preliminary Amendment
- 14. [X] Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
- 15. [] Certified Copy of Priority Document(s) (if foreign priority is claimed)
- 16. [] Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
- 17. [] Other:

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR §1.76:

[] Continuation Divisional [] Continuation-in-part (CIP) Prior application information: Examiner:

of prior application No._/_ Group/Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

[X] Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here 27752

Name (Print/Type) Jason J Registration No. (Attorney/Agent) 44.582 Signature Date July 3, 2001

Burden Hour Statement This form systemate of the Drief of the individual case. Any comments on the amount of time you are required to complete this form systemate of the individual case. Any comments on the amount of time you are required to complete this form systematic of the individual case. Any comments on the amount of time you are required to complete this form systematic of the individual case. Any comments on the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to complete this form systematic or the amount of time you are required to the amount of time you are required to the amount of time you are required

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FEE TRANSMITTAL		Complete if Known	
for FY 2001	Application Number	33000000	
Patent fees are subject to annual revision	Confirmation Number		
	Filing Date		
	First Named Inventor	Antonella Porta, et al.	
	Examiner Name		
	Group/Art Unit		
TOTAL AMOUNT OF PAYMENT (\$)710.00	Attorney Docket No	CM2393	

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)			
1. [X] The Commissioner is hereby authorized to charge indicated	3. ADDITIONAL FEES			
fees and credit any over payments to:	Code (\$) Fee Description Fee Paid			
Deposit Account Number 16-2480	105 130 Surcharge-late filing fee or oath [] 127 50 Surcharge-late provisional filing fee or cover sheet []			
Deposit Account Name The Procter & Gamble Company				
[X] Charge Any Additional Fee Required Under status See 37 CFR §127	139 130 Non-English specification [] 147 2,520 For filing a request for <i>ex parte</i> reexamination []			
37 C.F.R. §§1 16 and 1 17	112 920* Requesting publication of SIR prior to			
Charge Any Additional Fee Required Under status See 37 CFR §127 37 C.F.R. §§1 16 and 1 17	Examiner's action []			
FEE CALCULATION	113 1,840* Requesting publication of SIR after			
to the second se	Examiner's action []			
BASIC FILING FEE - Large Entity	115 110 Extension for reply within 1st month			
BASIC FILING FEE - Large Entity Code (\$) Fee Description Fee Paid	116 390 Extension for reply within 2 nd month			
Code (\$) <u>Fee Description</u> <u>Fee Paid</u>	117 890 Extension for reply within 3 rd month []			
101 710 Utility filing fee [710.00]	118 1,390 Extension for reply within 4 th month			
106 320 Design filing fee []	128 1,890 Extension for reply within 5th month			
107 490 Plant filing fee []	119 310 Notice of Appeal			
108 710 Reissue filing fee [] 114 150 Provisional filing fee	120 310 Filing a brief in support of an appeal			
270	121 270 Request for oral hearing [] 138 1.510 Petition to institute a public use proceeding []			
SUBTOTAL (1) (\$)[710.00]	1			
2. EXTRA CLAIM FEES - Large Entity				
2. EATRA CLAIM FEES - Large Entity	141 1,240 Petition to revive - unintentional [] 142 1,240 Utility issue fee (or reissue)			
Extra Below Fee	143 440 Design issue fee			
Claims Fee Paid	144 600 Plant issue fee			
Total Claims [16] - 20** = [] x [] = []	122 130 Petitions to the Commissioner			
Independent Claims [1] - 3^{**} = [] x [] = []	123 50 Petitions related to provisional applications			
Multiple Dependent [] = []	126 180 Submission of Information Disclosure Statement			
** or number previously paid, if greater; For Reissues, see below	146 710 Filing a submission after final rejection			
	(37 CFR § 1.129(a))			
Code (\$) Fee Description	149 710 For each additional invention to be			
103 18 Claims in excess of 20	examined (37 CFR §1.129(b)			
102 80 Independent claims in excess of 3	179 710 Request for Continued Examination (RCE) []			
104 270 Multiple dependent claim, if not paid	169 710 Request for expedited examination			
109 80 **Reissue independent claims over original patent	of a design application			
110 18 **Reissue claims in excess of 20 & over original patent				
	Other fee (specify)			
	Other fee (specify)			
SUBTOTAL (2) (\$)[]	* Reduced by Basic Filing Fee Paid SUBTOTAL(3) (\$) []			

SUBMITTED BY			Complete (if applicable)		
Name (Print/Type)	Jason J. Camp	Registration No. (Attorney/Agent)	44,582	Telephone	(513) 626-3371
Signature	19e/			Date	July 3, 2001

WARNING: Information on this form, any beginning production of the part of the

